

State: District of Columbia **Filing Company:** Star Insurance Company
TOI/Sub-TOI: 20.0 Commercial Auto/20.0000 Commercial Auto Combinations
Product Name: Star-ADAR-202001-AUTO Update
Project Name/Number: Star-ADAR-202001-AUTO Update /Star-ADAR-202001-AUTO Update

Filing at a Glance

Company: Star Insurance Company
Product Name: Star-ADAR-202001-AUTO Update
State: District of Columbia
TOI: 20.0 Commercial Auto
Sub-TOI: 20.0000 Commercial Auto Combinations
Filing Type: Form
Date Submitted: 01/14/2020
SERFF Tr Num: MEAD-132220879
SERFF Status: Submitted to State
State Tr Num:
State Status:
Co Tr Num: STAR-ADAR-202001-AUTO UPDATE

Effective Date: 04/01/2020
Requested (New):
Effective Date: 04/01/2020
Requested (Renewal):
Author(s): Marissa Lineberry
Reviewer(s):
Disposition Date:
Disposition Status:
Effective Date (New):
Effective Date (Renewal):

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General Information

Project Name: Star-ADAR-202001-AUTO Update Status of Filing in Domicile:
Project Number: Star-ADAR-202001-AUTO Update Domicile Status Comments:
Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:
Filing Status Changed: 01/14/2020
State Status Changed: Deemer Date:
Created By: Marissa Lineberry Submitted By: Marissa Lineberry
Corresponding Filing Tracking Number:

Filing Description:

Star Insurance Company (Star) writes commercial lines insurance in your state and is a member of ISO.

We are seeking approval of a new optional form for our Auto Dismantlers & Recyclers Program (ADAR).

Company and Contact

Filing Contact Information

Marissa Lineberry, Senior Compliance Analyst
Marissa.Lineberry@ameritrustgroup.com
26255 American Drive
Southfield, MI 48034
248-204-8225 [Phone]
248-358-1614 [FAX]

Filing Company Information

Star Insurance Company	CoCode: 18023	State of Domicile: Michigan
26255 American Drive	Group Code: 748	Company Type: property and
Southfield, MI 48034	Group Name: AmeriTrust Group	casualty
(248) 358-1100 ext. [Phone]	Inc	State ID Number:
	FEIN Number: 38-2626205	

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:

State:	District of Columbia	Filing Company:	Star Insurance Company
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Form Schedule

Item No.	Schedule Item Status	Form Name	Form Number	Edition Date	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1		Impaired Property Damage Endorsement	5962 CA	1119	END	New			5962 CA 1119 Impaired Property Damage Endorsement.pdf

Form Type Legend:

ABE	Application/Binder/Enrollment	ADV	Advertising
BND	Bond	CER	Certificate
CNR	Canc/NonRen Notice	DEC	Declarations/Schedule
DSC	Disclosure/Notice	END	Endorsement/Amendment/Conditions
ERS	Election/Rejection/Supplemental Applications	OTH	Other

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

IMPAIRED PROPERTY DAMAGE ENDORSEMENT

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM

SCHEDULE

1. Impaired Property Damage Aggregate Limit: \$ _____
2. Impaired Property Damage Each Accident Limit: \$ _____
3. Deductible: \$ _____
4. Participation Percentage: _____ %
5. Premium: _____

In consideration of the premium charged, the following provisions are added to this insurance. Unless modified by this endorsement, all terms and conditions of the policy remain unchanged.

- A. Subparagraph (2) of Exclusion j. of **Section II – General Liability Coverages, Paragraph A. Bodily Injury And Property Damage Liability** is deleted.
- B. The following provisions are added to **Section II – General Liability Coverages, Paragraph F. Limits of Insurance – General Liability Coverages**:
 8. Subject to 1.b. above, the Impaired Property Damage Aggregate Limit is the most we will pay for all “property damage” to “impaired property” or property that has not been physically injured, arising out of a defect, deficiency, inadequacy or dangerous condition in “work you performed” or your “products”.
 9. Subject to 1. and 8. above, the Impaired Property Damage Each Accident Limit is the most we will pay for all “property damage” to “impaired property” or property that has not been physically injured, arising out of a defect, deficiency, inadequacy or dangerous condition in “work you performed” or your “products”.
 10. Our obligation to pay for each “accident” of “property damage” to “impaired property” or property that has not been physically injured, arising out of a defect, deficiency, inadequacy or dangerous condition in “work you performed” or your “products”:
 - a. applies in excess of the Deductible amount shown in the Schedule above; and
 - b. is subject to your payment of the Participation Percentage, shown in the Schedule above, of the amount remaining after payment of the Deductible.
- C. You must pay your Deductible and Participation Percentage as directed by us. If we pay your Deductible and /or Participation Percentage on your behalf, you will reimburse us promptly for those amounts.

All other policy terms, conditions, definitions and exclusions remain unchanged.

SERFF Tracking #:	MEAD-132220879	State Tracking #:		Company Tracking #:	STAR-ADAR-202001-AUTO UPDATE
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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Bypassed - Item:	Readability Certificate
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Consulting Authorization
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Copy of Trust Agreement
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	